B1 (Official F	Form 1)(04	/13)											
	United States Bankruptcy Middle District of Florid								Vol	untary	Petition		
Name of Del Wright, D	,	ividual, ent	er Last, First	, Middle):			Name	e of Joint Do	ebtor (Spouse	e) (Last, First	, Middle):		
	All Other Names used by the Debtor in the last 8 years include married, maiden, and trade names):						used by the J maiden, and			years			
AKA Dor	rothy L. V	Wright; A	NKA Doro	thy Len	esa Wrig	ht							
Last four digi		Sec. or Indi	vidual-Taxp	ayer I.D. ((ITIN)/Com	plete EIN	Last t	Cour digits of than one, state	of Soc. Sec. or	r Individual-	Гахрауег I.I	D. (ITIN) No	o./Complete EIN
Street Addres 662 Skyla Port Cha	ark Lane	•	Street, City,	and State)):		Stree	Address of	f Joint Debtor	(No. and St	reet, City, ar	nd State):	
Fort Cila	iiiotte, i	_			_	ZIP Co	de						ZIP Code
County of Re	esidence or	of the Prin	cinal Place o	f Rusines		33952	Coun	ty of Reside	ence or of the	Principal Pl	ace of Busin	ness.	
Charlotte		or the Time	cipai i iace o	i Busines			Coun	ty of Reside	once or or the	i imeipai i i	acc of Bush	icss.	
Mailing Addr	ress of Deb	otor (if diffe	rent from str	eet addres	ss):		Maili	ng Address	of Joint Debt	tor (if differe	nt from stre	et address):	
					Г	ZIP Co	de						ZIP Code
Location of P (if different fr							•						1
Œ	• •	Debtor	1)			of Busine	ess		•	of Bankruj			eh
(Form of Organization) (Check one box) ■ Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. □ Corporation (includes LLC and LLP) □ Partnership □ Other (If debtor is not one of the above entities, check this box and state type of entity below.)			(Check one box) ☐ Health Care Business ☐ Single Asset Real Estate as def in 11 U.S.C. § 101 (51B) ☐ Railroad ☐ Stockbroker ☐ Commodity Broker ☐ Clearing Bank				☐ Chapt ☐ Chapt ☐ Chapt ☐ Chapt ☐ Chapt	ter 7 ter 9 ter 11 ter 12	of C	hapter 15 Pe a Foreign M hapter 15 Pe	one box) etition for R Main Procee etition for R Nonmain Pro	eding ecognition	
	Chapter 1	5 Debtors		Oth							e of Debts		
Country of del Each country i by, regarding,	in which a fo	oreign procee	eding	Tax-Exempt Entity (Check box, if applicable) □ Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).			able) nization l States	s "incurred by an individual primarily for					
		-	heck one box	κ)			ck one box:		•	ter 11 Debt			
debtor is u	to be paid in led application	installments	(applicable to art's considerat in installments.	ion certifyi	ng that the	Chec	Debtor is no ck if: Debtor's agg	t a small busi		defined in 11 U	J.S.C. § 101(standard)	51D). owed to insid	ders or affiliates)
Form 3A. Filing Fee attach signs			able to chapter art's considerat			ıst 🔲	•	ng filed with of the plan v	this petition. were solicited pr	•	one or more	classes of cre	editors,
Statistical/Ac ■ Debtor es □ Debtor es there will	stimates that	t funds will t, after any	l be available	erty is ex	cluded and	administ		es paid,		THIS	SPACE IS F	OR COURT	USE ONLY
Estimated Nu 1- 49	umber of Ci 50- 99	reditors 100- 199	200- 999	1,000- 5,000	5,001- 10,000	10,001- 25,000	25,001- 50,000	50,001- 100,000	OVER 100,000				
Estimated As So to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,00 to \$100 million	11 \$100,000,00 to \$500 million	\$500,000,001 to \$1 billion					
Estimated Lia \$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,00 to \$100 million	100,000,00 to \$500 million	\$500,000,001 to \$1 billion					

Case 9:14-bk-01906-FMD Doc 1 Filed 02/24/14 Page 2 of 47

B1 (Official For	m 1)(04/13)		Page 2
Voluntary	y Petition	Name of Debtor(s): Wright, Dorothy	
(This page mu	st be completed and filed in every case)		
	All Prior Bankruptcy Cases Filed Within Last		dditional sheet)
Location Where Filed:	Middle District	Case Number: 9:12-bk-11222	Date Filed: 7/24/12
Location Where Filed:	Middle District	Case Number: 9:11-bk-05427	Date Filed: 3/25/11
Per	nding Bankruptcy Case Filed by any Spouse, Partner, or	Affiliate of this Debtor (If more tha	n one, attach additional sheet)
Name of Debte	or:	Case Number:	Date Filed:
- None - District:		Relationship:	Judge:
District.		Relationship.	Judge.
	Exhibit A		xhibit B I whose debts are primarily consumer debts.)
forms 10K as pursuant to S and is reques	leted if debtor is required to file periodic reports (e.g., and 10Q) with the Securities and Exchange Commission section 13 or 15(d) of the Securities Exchange Act of 1934 sting relief under chapter 11.) A is attached and made a part of this petition.	I, the attorney for the petitioner name have informed the petitioner that [he 12, or 13 of title 11, United States Co	d in the foregoing petition, declare that I or she] may proceed under chapter 7, 11, de, and have explained the relief available tify that I delivered to the debtor the notice
_ Exilibit	A is attached and made a part of this pention.	Signature of Attorney for Debtor(s David W. Fineman, Esq.	(Date)
	Exh	abit C	
Does the debto	r own or have possession of any property that poses or is alleged to	pose a threat of imminent and identifiable	e harm to public health or safety?
☐ Yes, and ☐ No.	Exhibit C is attached and made a part of this petition.		
(To be compl	Exh eted by every individual debtor. If a joint petition is filed, ea	aibit D	a caparata Evhihit D)
-	D completed and signed by the debtor is attached and made	•	a separate Exhibit D.)
If this is a join		F F	
Ī -	D also completed and signed by the joint debtor is attached a	and made a part of this petition.	
	Information Regardin		
_	(Check any ap Debtor has been domiciled or has had a residence, princip		ata in this District for 190
_	days immediately preceding the date of this petition or for	a longer part of such 180 days than i	in any other District.
	There is a bankruptcy case concerning debtor's affiliate, go	eneral partner, or partnership pending	; in this District.
	Debtor is a debtor in a foreign proceeding and has its princ this District, or has no principal place of business or assets proceeding [in a federal or state court] in this District, or the sought in this District.	in the United States but is a defenda	ant in an action or
	Certification by a Debtor Who Reside (Check all app		rty
	Landlord has a judgment against the debtor for possession		, complete the following.)
	(Name of landlord that obtained judgment)		
	(Address of landlord)		
	Debtor claims that under applicable nonbankruptcy law, the entire monetary default that gave rise to the judgment	for possession, after the judgment for	possession was entered, and
	Debtor has included with this petition the deposit with the after the filing of the petition.	•	
I 🗆	Debtor certifies that he/she has served the Landlord with the	his certification, (11 U.S.C. § 362(1)).	

B1 (Official Form 1)(04/13) Page 3

Voluntary Petition

(This page must be completed and filed in every case)

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Dorothy Wright

Signature of Debtor Dorothy Wright

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

February 24, 2014

Date

Signature of Attorney*

X /s/ David W. Fineman, Esq.

Signature of Attorney for Debtor(s)

David W. Fineman, Esq. 0040993

Printed Name of Attorney for Debtor(s)

The Dellutri Law Group, P.A.

Firm Name

1436 Royal Palm Square Blvd. Fort Myers, FL 33919-1049

Address

(239) 939-0900 Fax: (239) 939-0588

Telephone Number

February 24, 2014

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Name of Debtor(s):

Wright, Dorothy

Signatures

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

Date

Address

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

B 1D (Official Form 1, Exhibit D) (12/09)

United States Bankruptcy Court Middle District of Florida

In re	Dorothy Wright		Case No.	
		Debtor(s)	Chapter	13

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] ____

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]

B 1D (Official Form 1, Exhibit D) (12/09) - Cont.					
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.); ☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.); ☐ Active military duty in a military combat zone.					
☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.					
I certify under penalty of perjury that the information provided above is true and correct.					
Signature of Debtor: /s/ Dorothy Wright Dorothy Wright					
Date: February 24, 2014					

B 6 Summary (Official Form 6 - Summary) (12/13)

United States Bankruptcy Court Middle District of Florida

In re	Dorothy Wright		Case No.	
•		Debtor	-,	
			Chapter	13

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	50,669.00		
B - Personal Property	Yes	4	36,045.69		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		83,087.57	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	4		8,995.00	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			1,690.83
J - Current Expenditures of Individual Debtor(s)	Yes	2			1,089.10
Total Number of Sheets of ALL Schedu	ıles	18			
	To	otal Assets	86,714.69		
			Total Liabilities	92,082.57	

B 6 Summary (Official Form 6 - Summary) (12/13)

United States Bankruptcy Court Middle District of Florida

In re	Dorothy Wright		Case No.		
		Debtor	-,		
			Chapter	13	

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	50.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	50.00

State the following:

Average Income (from Schedule I, Line 12)	1,690.83
Average Expenses (from Schedule J, Line 22)	1,089.10
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	2,668.39

State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY" column		33,918.57
Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		8,995.00
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		42,913.57

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B6A (Official Form 6A) (12/07)

In re	Dorothy Wright	Case No	
		Debtor ,	

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim
662 Skylark Lane Port Charlotte FL		-	48,669.00	81,157.57
burial plot at Restlawn Cemetery Port Charlotte FL		-	2,000.00	0.00

Sub-Total > **50,669.00** (Total of this page)

Total > **50,669.00**

0 continuation sheets attached to the Schedule of Real Property

(Report also on Summary of Schedules)

B6B (Official Form 6B) (12/07)

In re	Dorothy Wright	Case No	
•		Debtor	

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

2. Ch acc sha thr hor unic coo. 3. Sec util lan 4. Ho	ash on hand necking, savings or other financial counts, certificates of deposit, or ares in banks, savings and loan, rift, building and loan, and	Cash and coins Suncoast checking acct. 2450	-	40.00
acc sha thr hor unicood. 3. Sec util lan 4. Ho inc	counts, certificates of deposit, or ares in banks, savings and loan,	Suncoast checking acct. 2450		
sha thr hor unicood	ares in banks, savings and loan,		-	7.00
3. Secutii lan	int, bunding and loan, and	Suncoast savings acct. 2400	-	5.00
utii lan 4. Ho inc	omestead associations, or credit nions, brokerage houses, or operatives.	Putnam Investments acct. 0384	-	79.00
inc	ecurity deposits with public ilities, telephone companies, and others.	x		
	ousehold goods and furnishings, cluding audio, video, and	mattress, area rugs, chest of drawers	-	500.00
	emputer equipment.	stove, microwave, barbecue grill, refrigerator, freezer, dishwasher, washer, dryer, vacuum, toaster, blender, can opener, coffee maker, humidifier, iron, fans, televisions, clocks/clock radios, kitchen table & chairs, telephones, cell phone, cooking ware, dinnerware/dishes, glassware/cups, flatware, pots/pans, knives, dining table & chairs, couch, sofa, coffee table, end tables entertainment center, curio cabinet, bedroom suite bed frame, box springs, night stands, dresser, bedrom suite, bed frame, box springs, mattress, night stands, dresser, bedroom suite, bed frame, box springs, mattress, night stand, dresser, chest of drawers, mirror, lamps, vases, laundry baskets, ironing board, broom/mop/bucket, luggage, bed spreads, sheets/pillowcases, pillows, towels/washcloths, bath/shower accessories, table linens/napkins, blinds/draperies/curtains, patio furniture, push lawnmower, garden hoses, plants/flowers, shed	,	1,600.00
obj rec	ooks, pictures and other art bjects, antiques, stamp, coin, cord, tape, compact disc, and her collections or collectibles.	X		
			Sub-Tota	al > 2,231.00

3 continuation sheets attached to the Schedule of Personal Property

(Total of this page)

B6B (Official Form 6B) (12/07) - Cont.

In re	Dorothy Wright	Case No.	
_		······································	

Debtor

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
6.	Wearing apparel.		various women's clothing	-	100.00
7.	Furs and jewelry.		rings, necklaces, earrings, watch	-	150.00
8.	Firearms and sports, photographic, and other hobby equipment.	X			
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.		life insurance through work	-	0.00
10.	Annuities. Itemize and name each issuer.	X			
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing		FRS Investment Plan	-	14,457.89
	plans. Give particulars.		State of Florida Deferred Compensation Plan	-	17,128.72
			Putnam Investments IRA rollover 4484	-	202.33
			Primerica IRA 0625	-	274.75
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14.	Interests in partnerships or joint ventures. Itemize.	X			
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16.	Accounts receivable.	X			
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			

Sheet <u>1</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

32,313.69

Sub-Total >

(Total of this page)

B6B (Official Form 6B) (12/07) - Cont.

In re	Dorothy Wright	Case No.
_		

Debtor

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

	Type of Property	N O N Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	anticipated tax refund	-	Unkwn or Notice Only
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X		
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X		
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X		
22.	Patents, copyrights, and other intellectual property. Give particulars.	X		
23.	Licenses, franchises, and other general intangibles. Give particulars.	Х		
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X		
25.	Automobiles, trucks, trailers, and other vehicles and accessories.	2005 Toyota Scion VIN JTLKT324550194103	-	1,500.00
26.	Boats, motors, and accessories.	х		
27.	Aircraft and accessories.	x		
28.	Office equipment, furnishings, and supplies.	X		
29.	Machinery, fixtures, equipment, and supplies used in business.	X		
			Sub-Total (Total of this page)	al > 1,500.00

Sheet **2** of **3** continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

In re	Dorothy Wright	Case No	
_		Debtor	

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

Type of	Property N O N N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
30. Inventory.	Х			
31. Animals.		dog	-	1.00
32. Crops - growing particulars.	or harvested. Give X			
33. Farming equipm implements.	ent and X			
34. Farm supplies, c	hemicals, and feed. X			
35. Other personal p not already listed				

| Sub-Total > 1.00 | | (Total of this page) | | Total > 36,045.69 |

Sheet <u>3</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

B6C (Official Form 6C) (4/13)

In re	Dorothy Wright	Case No
•		Debtor

Debtor claims the exemptions to which debtor is entitled un (Check one box) 11 U.S.C. §522(b)(2) 11 U.S.C. §522(b)(3)	\$155,675. (Amoun		mption that exceeds /16, and every three years therea or after the date of adjustment.)
Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
	Fla. Const. art. X, § 4(a)(1); Fla. Stat. Ann. §§ 222.01 & 222.02	100%	48,669.00
Checking, Savings, or Other Financial Accounts, Ce Suncoast checking acct. 2450	rtificates of Deposit Fla. Stat. Ann. § 222.11(2)(c)	75%	7.00
Household Goods and Furnishings stove, microwave, barbecue grill, refrigerator, freezer, dishwasher, washer, dryer, vacuum, toaster, blender, can opener, coffee maker, humidifier, iron, fans, televisions, clocks/clock radios, kitchen table & chairs, telephones, cell phone, cooking ware, dinnerware/dishes, glassware/cups, flatware, pots/pans, knives, dining table & chairs, couch, sofa, coffee table, end tables, entertainment center, curio cabinet, bedroom suite, bed frame, box springs, night stands, dresser, bedrom suite, bed frame, box springs, mattress, night stands, dresser, bedroom suite, bed frame, box springs, mattress, night stands, dresser, bedroom suite, bed frame, box springs, mattress, night stand, dresser, chest of drawers, mirror, lamps, vases, laundry baskets, troning board, broom/mop/bucket, luggage, bed spreads, sheets/pillowcases, pillows, towels/washcloths, bath/shower accessories, table linens/napkins, blinds/draperies/curtains, patio furniture, push lawnmower, garden hoses, plants/flowers, shed	Fla. Const. art. X, § 4(a)(2)	1,000.00	1,600.00
nterests in IRA, ERISA, Keogh, or Other Pension or FRS Investment Plan	Profit Sharing Plans Fla. Stat. Ann. § 222.21(2)	100%	14,457.89
State of Florida Deferred Compensation Plan	Fla. Stat. Ann. § 222.21(2)	100%	17,128.72
Putnam Investments IRA rollover 4484	Fla. Stat. Ann. § 222.21(2)	100%	202.33
Primerica IRA 0625	Fla. Stat. Ann. § 222.21(2)	100%	274.75
	Refund Fla. Stat. Ann. § 222.25(3) 100% of any EIC	Unkwn or Notice Only	Unkwn or Notice Only
Automobiles, Trucks, Trailers, and Other Vehicles 2005 Toyota Scion VIN JTLKT324550194103	Fla. Stat. Ann. § 222.25(1)	1,000.00	1,500.00

Total: **34,068.94 83,839.69**

B6D (Official Form 6D) (12/07)

In re	Dorothy Wright	Case No
-		, Debtor

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured

guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Contingent". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

		_		_				
CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	W H	sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UZLIQUIDATED	U T E	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. xxx-xxxxxxx6447	4		Opened 3/01/07 Last Active 4/01/09	1	Ė			
Badcock 1048 S Tamami Trail, Box 278 Punta Gorda, FL 33950		-	mattress, area rugs, chest of drawers					
	_		Value \$ 500.00			Ш	1,930.00	1,430.00
Account No. xxxxxx3780 Carrington Mortgage Se 1610 E Saint Andrew Pl Santa Ana, CA 92705		-	Opened 8/30/95 Last Active 1/01/12 Mortgage 662 Skylark Lane Port Charlotte FL			x		
	_	_	Value \$ 48,669.00				53,083.00	4,414.00
Account No. Triad Home Improvement 16970-3 San Carlos Blvd Suite 181 Fort Myers, FL 33908		-	03/15/07 Mortgage 662 Skylark Lane Port Charlotte FL Value \$ 48,669.00				28,074.57	28,074.57
Account No.			Value \$					
continuation sheets attached			(Total of t	Subt his			83,087.57	33,918.57
			(Report on Summary of So		ota lule		83,087.57	33,918.57

B6E (Official Form 6E) (4/13)

•			
In re	Dorothy Wright	Case No.	
-		Debtor ,	

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.	
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)	
□ Domestic support obligations Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible rel of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).	lati
□ Extensions of credit in an involuntary case Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment trustee or the order for relief. 11 U.S.C. § 507(a)(3).	t of
☐ Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent s representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).	
☐ Contributions to employee benefit plans Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).	sine
□ Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).	
□ Deposits by individuals Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).	
☐ Taxes and certain other debts owed to governmental units Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).	
□ Commitments to maintain the capital of an insured depository institution Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Fed Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).	dera
Claims for death or personal injury while debtor was intoxicated Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).	

0 continuation sheets attached

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B6F (Official Form 6F) (12/07)

In re	Dorothy Wright	Case No.
		Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. \$112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of

Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

— Check and con it dector has no creations nothing unseem			no to report on this senegate r					
CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	C	Ų	I		
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	ODE BT OR	C A M		N G	GD-	SPLTED	3	AMOUNT OF CLAIM
Account No. 8570			10/26/08		.DATED		Ī	
Aargon Agency 8668 Spring Mountain Road Las Vegas, NV 89117		-	collections Intl. Portfolio		D			155.00
Account No. 1605		Г	collections Intl. Portfolio					
Aargon Agency 8668 Spring Mountain Road Las Vegas, NV 89117		-						102.00
Account No. 0116			07/30/08 collections for Domestications				1	
Asset Acceptance Llc Po Box 1630 Warren, MI 48090		-						
								1,260.00
Account No. xxxxxxxxxxxxx1904 First Premier Bank 601 S Minnesota Ave Sioux Falls, SD 57104		-	Opened 4/29/08 Last Active 7/01/08 Credit Card					
								502.00
continuation sheets attached			(Total of t	Subt			,	2,019.00

B6F (Official Form 6F) (12/07) - Cont.

In re	Dorothy Wright	Case No
•		Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS	Iŏ	I I IU	sband, Wife, Joint, or Community				
INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	J H H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	COXFLXGEX	l QU L	DISPUTED	AMOUNT OF CLAIM
Account No. xxxxxxxxxxxx6014			Opened 10/15/07 Last Active 6/01/08	Τ̈́	D A T E D		
First Premier Bank 601 S Minnesota Ave Sioux Falls, SD 57104		-	Credit Card		D		439.00
Account No. 4906	┢		collections for Advanced Orthopedic	-			
Gulf Coast Collection 5630 Marquesas Circle Sarasota, FL 34233-3331		-					
Account No. 2146							769.00
Hillcrest Collections 852 North Dorothy Drive Suite 512 Richardson, TX 75081		-	collections for United Debt Holdings				2,526.00
Account No. 7106	┢		collections for Murdock Ambulatory				
Merchants Association 134 South Tampa Street Tampa, FL 33602		-					520.00
Account No. 4842	\vdash		collections for Gulf Coast Anesthesia	+	\vdash	\vdash	
Merchants Association 134 South Tampa Street Tampa, FL 33602		-					280.00
Sheet no. <u>1</u> of <u>3</u> sheets attached to Schedule of	-		ı	Sub	tota	ıl	4,534.00

B6F (Official Form 6F) (12/07) - Cont.

In re	Dorothy Wright	Case No.	
_		Debtor	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

CREDITOR'S NAME,	C	F	Hus	sband, Wife, Joint, or Community	C	U	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	L V	1 W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	ONTINGENT	UNLIQUIDAT	T E	AMOUNT OF CLAIM
Account No. 4624			Ì	collections for American Medic	٦Ÿ	T E D		
Merchants Association 134 South Tampa Street Tampa, FL 33602		-				D		245.00
Account No. 2111	+			collections for Gulf Coast Anesthesia				
Merchants Association 134 South Tampa Street Tampa, FL 33602		-						
								83.00
Account No. 4124 NCO Financial Systems PO Box 13570 Philadelphia, PA 19101			-	collections for Peace River Regional				50.00
Account No. xxxxx73N1		t		Opened 12/23/11 Last Active 10/01/10	+			
Ncs Collections Llc 5975 Cattlemen Ln Sarasota, FL 34232		-		Collection Attorney Charlotte Cardiovasc				85.00
Account No. 5393			- 1	10/30/08				33.00
Portfolio Recvry&Affil 120 Corporate Blvd Ste 1 Norfolk, VA 23502		_	•	collections for HSBC Card Services				764.00
Sheet no. 2 of 3 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims	f			(Total of	Sub			1,227.00

B6F (Official Form 6F) (12/07) - Cont.

In re	Dorothy Wright	Case No.	
-		Debtor	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

Husband, Wife, Joint, or Community UNLIQUIDATED CODEBTOR CREDITOR'S NAME, ONTINGENT **MAILING ADDRESS** DATE CLAIM WAS INCURRED AND INCLUDING ZIP CODE, W CONSIDERATION FOR CLAIM. IF CLAIM C AMOUNT OF CLAIM AND ACCOUNT NUMBER IS SUBJECT TO SETOFF, SO STATE. (See instructions above.) Opened 1/26/11 Account No. xxxx9832 **Collection Attorney Adt Primary Financial Serv** 5959 Corporate Dr Ste 14 Houston, TX 77036 1,131.00 Account No. **Regions Bank** 7300 Chapman Highway X Knoxville, TN 37920 **Unkwn or Notice** Only Account No. 9435 collections for Black Expressions **RJM Acquisitions LLC** 575 Underhill Boulevard Suite 224 Syosset, NY 11791-3416 84.00 Account No. Account No. Sheet no. 3 of 3 sheets attached to Schedule of Subtotal 1,215.00 Creditors Holding Unsecured Nonpriority Claims (Total of this page) Total

(Report on Summary of Schedules)

8,995.00

Case 9:14-bk-01906-FMD Doc 1 Filed 02/24/14 Page 20 of 47

B6G (Official Form 6G) (12/07)

In re	Dorothy Wright	Case No.
_	, ,	<u> </u>
_		Debtor

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

Case 9:14-bk-01906-FMD Doc 1 Filed 02/24/14 Page 21 of 47

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

B6H (Official Form 6H) (12/07)

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

Fill	in this information to i	dentify your ca	ase:								
Del	btor 1 <u>[</u>	Dorothy Wri	ght			_					
	btor 2					_					
Uni	ited States Bankruptcy	Court for the	: MIDDLE DISTRICT O	F FLORIDA		_					
(If kr	se number nown)						□ An		d filing ent showin	g post-petition	
0	fficial Form E	<u> 8 61</u>					M	M / DD/ Y	YYY		
S	chedule I: Y	our Inc	ome								12/1
atta	ch a separate sheet	to this form.	r spouse is not filing wi On the top of any addition				case nur	mber (if I	(nown). A		
	If you have more that	an one job,	Fundament status	■ Employed				☐ Emple	oyed		
	attach a separate page with information about additional employers.		Employment status	☐ Not employed				☐ Not employed			
			Occupation	Senior CNA							
	Include part-time, se self-employed work.		Employer's name	Department of V	eteran	s Af	fairs_				
	Occupation may incor homemaker, if it a		Employer's address								
			How long employed th	nere? <u>5 years</u>				_			
Pai	ft 2: Give Detai	Is About Mor	thly Income								
Esti spo	mate monthly incomuse unless you are se	e as of the daparated.	ate you file this form. If y	ou have nothing to re	port for	any I	ine, write	\$0 in the	space. Inc	clude your nor	n-filing
	ou or your non-filing sp e space, attach a sepa		ore than one employer, co	embine the information	for all e	emplo	oyers for the	hat perso	n on the li	nes below. If y	you need
							For Deb	tor 1		btor 2 or ng spouse	
2.			ry, and commissions (be calculate what the monthl		2.	\$	1,8	840.50	\$	N/A	
3.	Estimate and list n	nonthly overt	ime pay.		3.	+\$		<u>421.19</u>	+\$	N/A	
4.	Calculate gross Inc	come. Add lir	ne 2 + line 3.		4.	\$	2,26	1.69	\$	N/A	

Official Form B 6I Schedule I: Your Income page 1

Debt	or 1	Dorothy Wright	ı	Case	number (if known)			
				For	Debtor 1	For Debt	or 2 or g spouse	
	Cop	py line 4 here	4.	\$	2,261.69	\$	N/A	
5.	List	t all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	328.27	\$	N/A	
	5b.	·	5b.	\$ <u></u> _	0.00	\$	N/A	
	5c.	Voluntary contributions for retirement plans Required repayments of retirement fund loans	5c. 5d.	\$_ \$	0.00	\$	N/A	
	5d. 5e.	Insurance	5u. 5e.	\$ <u>_</u>	0.00	\$	N/A N/A	
	5f.	Domestic support obligations	5f.	^Ψ -	123.58	\$	N/A N/A	
	5g.	• • •	5g.	\$ -	0.00	\$ <u></u>	N/A	
	5h.		5h.+	\$ —		+ \$	N/A	
		life insurance	_	\$_	64.00	\$	N/A	
		Preorp employee contribution	_	\$	59.82	\$	N/A	
		AFSCME Council		\$	35.19	\$	N/A	
6.	Add	d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	- 6.	\$	870.86	\$	N/A	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,390.83	\$	N/A	
8.	List 8a.	profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total		_				
		monthly net income.	8a.	\$_	0.00	\$	N/A	
	8b.		8b.	\$	0.00	\$	N/A	
	8c. 8d.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation	8c. 8d.	\$_	0.00	\$	N/A	
	8e.		8e.	\$ <u></u>	0.00	φ	N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:		\$ \$	0.00	\$\$	N/A N/A	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	N/A	
	8h.	Other monthly income. Specify: father's contributions	8h.+	\$ <u>_</u>	300.00	+ \$	N/A	
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	300.00	\$	N/A	
10.		culate monthly income. Add line 7 + line 9. If the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		1,690.83 + \$_	N/	A = \$ <u>1,69</u>	90.83
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule lude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a secify:	depend		•	ed in <i>Sche</i> a	lule J. 1. +\$	0.00
12.	Wri	d the amount in the last column of line 10 to the amount in line 11. The resulte that amount on the Summary of Schedules and Statistical Summary of Certain blies					, <u> </u>	90.83
13.	Do	you expect an increase or decrease within the year after you file this form?	?				Combined monthly inco	ome
	=	No. Yes. Explain:						

Fill in	n this information to identif	y your case:									
Debto	or 1 Dorothy	Wright	Che	ck if this is:							
				☐ An amended filing							
Debte	or 2			☐ A supplement showing post-petition chapter 13							
(Spot	use, if filing)			expenses as of the following date:							
Unite	ed States Bankruptcy Court	for the: MIDDLE DISTRICT OF FLOR	IDA	MM / DD / YYYY							
	number nown)			☐ A separate filing for Debtor 2 because Debtor 2 maintains a separate household							
	ficial Form B 6J hedule J: Your				12/1						
		EXPENSES s possible. If two married people are filing	together, both are equally respon	sible for supplying c	12/1						
infor	mation. If more space is n	eeded, attach another sheet to this form.									
(if kn	nown). Answer every ques	tion.									
Part 1	Describe Your Hourst Is this a joint case?	usehold									
	■ No. Go to line 2.										
		e in a separate household?									
	□ No	-									
	☐ Yes. Debtor 2 i	must file a separate Schedule J.									
2.	Do you have dependents?	No No									
	Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?						
	Do not state the dependent	s'			□ No						
	names.		Grandson	19	Yes						
					□ No						
			Father	88	Yes						
					□ No						
					☐ Yes						
					□ No						
3.	Do your expenses include	=		_	☐ Yes						
	expenses of people other yourself and your depend	than \square v									
Part 2	Estimate Vous On	going Monthly Expenses									
		our bankruptcy filing date unless you are	using this form as a supplement i	n a Chapter 13 case t	o report						
expe		bankruptcy is filed. If this is a supplemen									
		non-cash government assistance if you kn		V	LONGOG						
such	assistance and have inclu	ded it on Schedule I: Your Income (Officia	al Form 61.)	Your exp	enses						
4.	The rental or home owne and any rent for the ground	rship expenses for your residence. Include l or lot.	e first mortgage payments 4.	\$	0.00						
	If not included in line 4:										
	4a. Real estate taxes		4a.	\$	72.76						
		er's, or renter's insurance	4b.		133.34						
	1 .	repair, and upkeep expenses	4c.	\$	0.00						
	4d. Homeowner's associ	ciation or condominium dues	4d.	\$	0.00						
5.	Additional mortgage pay	ments for your residence, such as home eq	uity loans 5.	\$	0.00						

Deb	tor 1 Dorothy Wright	Case number (if known)	
6.	Utilities:		
0.	6a. Electricity, heat, natural gas	6a. \$	125.00
	6b. Water, sewer, garbage collection	6b. \$	45.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	232.00
	6d. Other. Specify:	6d. \$	0.00
7.	Food and housekeeping supplies	7. \$	150.00
8.	Childcare and children's education costs	8. \$	0.00
9.	Clothing, laundry, and dry cleaning	9. \$	30.00
10.	Personal care products and services	10. \$	0.00
11.	Medical and dental expenses	11. \$	42.00
12.	Transportation. Include gas, maintenance, bus or train fare.		_
	Do not include car payments.	12. \$	100.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$	0.00
14.	Charitable contributions and religious donations	14. \$	0.00
15.	Insurance.		
	Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance	15a. \$	0.00
	15b. Health insurance	15a. \$	0.00
	15c. Vehicle insurance	15c. \$	
	15d. Other insurance. Specify:	15d. \$	114.00
16	* *	13d. \$	0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: vehicle tags	16. \$	5.00
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a. \$	0.00
	17b. Car payments for Vehicle 2	17b. \$	0.00
	17c. Other. Specify:	17c. \$	0.00
	17d. Other. Specify:	17d. \$	0.00
18.	Your payments of alimony, maintenance, and support that you did not report as deducted		0.00
4.0	from your pay on line 5, Schedule I, Your Income (Official Form 61).	18. \$	
19.	The state of the s	\$	0.00
20	Specify:	19.	
20.	Other real property expenses not included in lines 4 or 5 of this form or on <i>Schedule I: You</i> 20a. Mortgages on other property	our Income. 20a. \$	0.00
	20b. Real estate taxes	20a. \$	0.00
	20c. Property, homeowner's, or renter's insurance	20c. \$	0.00
	1 2.	20d. \$	0.00
	20d. Maintenance, repair, and upkeep expenses		0.00
21	20e. Homeowner's association or condominium dues	20e. \$	0.00
21.	Other: Specify: pet expenses	21. +\$	40.00
22.	Your monthly expenses. Add lines 4 through 21.	22. \$	1,089.10
	The result is your monthly expenses.		
23.	·	22 ¢	4 000 00
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	1,690.83
	23b. Copy your monthly expenses from line 22 above.	23b\$	1,089.10
	23c. Subtract your monthly expenses from your monthly income.		004.70
	The result is your monthly net income.	23c. \$	601.73

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

■ Yes. Explain: Grandson is leaving in May, 2014. Debtor will cease making 2nd mortgage payment upon order stripping.

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B6 Declaration (Official Form 6 - Declaration). (12/07)

United States Bankruptcy Court Middle District of Florida

In re	Dorothy Wright			Case No.						
			Debtor(s)	Chapter	13					
	DECLARATION CONCERNING DEBTOR'S SCHEDULES									
DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR										
I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of sheets, and that they are true and correct to the best of my knowledge, information, and belief.										
Date	February 24, 2014	Signature	/s/ Dorothy Wright Dorothy Wright Debtor							

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

United States Bankruptcy Court Middle District of Florida

In re	Dorothy Wright		Case No.	
		Debtor(s)	Chapter	13

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE **\$21,377.00 2011: wages \$17,882.00 2012: wages**

\$26,758.86 2013: estimated wages

\$1,622.74 2014: estimated year to date wages

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$1,795.00 2012: 2011 tax refund \$4,238.00 2013: 2012 tax refund

\$600.00 2014 YTD: Debtor Contributions from father \$3,600.00 2013: Debtor Contributions from father \$3,600.00 2012: Debtor Contributions from father

3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. Individual or joint debtor(s) with pr

a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS
OF CREDITOR
DATES OF
PAYMENTS
AMOUNT PAID
OWING

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT

DATES OF PAID OR

PAYMENTS/ VALUE OF AMOUNT STILL

CREDITOR TRANSFERS TRANSFERS OWING

NAME AND ADDRESS OF CREDITOR

c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR DATE OF PAYMENT AMOUNT PAID OWING

4. Suits and administrative proceedings, executions, garnishments and attachments

None

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT NATURE OF COURT OR AGENCY STATUS OR AND CASE NUMBER PROCEEDING AND LOCATION DISPOSITION

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

3

None b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION
OF COURT
CASE TITLE & NUMBER

DATE OF

DESCRIPTION AND VALUE OF

CASE TITLE & NUMBER ORDER PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

The Dellutri Law Group, PA 1436 Royal Palm Square Blvd Fort Myers, FL 33919

DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR 09/2013

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY \$305.00 (filing fee, credit counseling, financial management course)

10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER. AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY

NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS DATE OF TRANSFER OR SURRENDER, IF ANY

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

14. Property held for another person

None List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

15. Prior address of debtor

None

If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

NAME AND ADDRESS OF DATE OF **ENVIRONMENTAL** SITE NAME AND ADDRESS **GOVERNMENTAL UNIT** NOTICE LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF DATE OF **ENVIRONMENTAL**

SITE NAME AND ADDRESS **GOVERNMENTAL UNIT** NOTICE LAW

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which None

the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

6

18. Nature, location and name of business

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN ADDRESS

BEGINNING AND NATURE OF BUSINESS ENDING DATES

None h Identify any business

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.



NAME

NAME ADDRESS

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date	February 24, 2014	Signature	/s/ Dorothy Wright
			Dorothy Wright
			Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

UNITED STATES BANKRUPTCY COURT MIDDLE DISTRICT OF FLORIDA

NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$46 administrative fee, \$15 trustee surcharge: Total Fee \$306)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$46 administrative fee: Total fee \$281)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments

Page 2

over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filing fee, \$46 administrative fee: Total fee \$1,213)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$46 administrative fee: Total fee \$246)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy forms.html#procedure.

B 201B (Form 201B) (12/09)

United States Bankruntey Court

	Oill	Middle District of Florida	1.0	
In re	Dorothy Wright		Case No.	
		Debtor(s)	Chapter	13
		OF NOTICE TO CONSUMI 42(b) OF THE BANKRUPTO		R(S)
Code.	I (We), the debtor(s), affirm that I (we) ha	Certification of Debtor ave received and read the attached not	ice, as required	l by § 342(b) of the Bankruptcy
Dorotl	hy Wright	χ /s/ Dorothy Wrig	ght	February 24, 2014
Printed	d Name(s) of Debtor(s)	Signature of Deb	otor	Date
Case N	No. (if known)	X		
		Signature of Join	nt Debtor (if an	y) Date

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

United States Bankruptcy Court Middle District of Florida

		Milatie District of Florida		
In re	Dorothy Wright		Case No.	
		Debtor(s)	Chapter	13
	VER	IFICATION OF CREDITOR N	MATRIX	
The ab	ove-named Debtor hereby verifies	that the attached list of creditors is true and co	rrect to the best	of his/her knowledge.
Date:	February 24, 2014	/s/ Dorothy Wright		or my nor monroage.
		Dorothy Wright		
		Signature of Debtor		

Aargon Agency ChexSystems Gulf Coast Collection 8668 Spring Mountain Road Consumer Relation 5630 Marquesas Circle Las Vegas, NV 89117 Sarasota, FL 34233-3331 7805 Hudson Rd Ste 100 Woodbury, MN 55125 ADT Security Services Citimortgage Inc Hillcrest Collections Bankruptcy Notices Po Box 9438 852 North Dorothy Drive 14200 East Exposition Avenue Gaithersburg, MD 20898 Suite 512 Aurora, CO 80012 Richardson, TX 75081 Advanced Orthopedic Center Equifax Credit Information Hsbc Bank 1641 Tamiami Trail Services, Inc. Po Box 9 Suite 1 P.O. Box 740241 Buffalo, NY 14240 Port Charlotte, FL 33948-1018 Atlanta, GA 30374 American Medic of Charlotte Experian Internal Revenue Service 475 Anton Boulevard 2343 Aaron Street Centralized Insolvency Op Port Charlotte, FL 33952 Costa Mesa, CA 92626 PO Box 7346 Philadelphia, PA 19101-7346 First Premier Bank Asset Acceptance Llc International Portfolio Po Box 1630 601 S Minnesota Ave 200 Barr Harbor Drive Warren, MI 48090 Sioux Falls, SD 57104 Suite 400 Conshohocken, PA 19428 First Premier Bank Merchants Association Badcock 1048 S Tamami Trail, Box 278 Bankruptcy Notices 134 South Tampa Street PO Box 5524 Tampa, FL 33602 Punta Gorda, FL 33950 Sioux Falls, SD 57117 Carrington Mortgage Se First Premier Bank Murdock Ambulatory Surgery 1610 E Saint Andrew Pl 3820 North Louise Avenue 1400 Education Way Port Charlotte, FL 33948 Santa Ana, CA 92705 Sioux Falls, SD 57107-0145 Carrington Mortgage Services Gulf Coast Anesthesia NCO Financial Systems PO Box 54285 21275 Olean Boulevard PO Box 13570 Irvine, CA 92619-4285 Philadelphia, PA 19101 Port Charlotte, FL 33952 Charlotte Cardiovascular Gulf Coast Anesthesia NCO Financial Systems 507 Prudential Road 4161 Tamiami Trail 5424 Grand Boulevard Suite 701 New Port Richey, FL 34652 Horsham, PA 19044

Port Charlotte, FL 33952

Ncs Collections Llc 5975 Cattlemen Ln Sarasota, FL 34232 TransUnion Consumer Solution P.O. Box 2000 Chester, PA 19022-2000

Peace River Regional 2500 Harbor Boulevard Port Charlotte, FL 33952 Triad Home Improvement 16970-3 San Carlos Blvd Suite 181 Fort Myers, FL 33908

Portfolio Recvry&Affil 120 Corporate Blvd Ste 1 Norfolk, VA 23502 United Debt Holdings PO Box 248 Hazelwood, MO 63042

Primary Financial Serv 5959 Corporate Dr Ste 14 Houston, TX 77036 US Attorney General 950 Pennsylvania Ave NW Washington, DC 20530

Quatum 3 Group LLC PO Box 788 Kirkland, WA 98083-0788 US Attorney's Office MD Fla 400 N Tampa St Ste 3200 Tampa, FL 33602-4798

Regions Bank 7300 Chapman Highway Knoxville, TN 37920 World Financial Network NB Bankruptcy Department PO Box 182125 Columbus, OH 43218-2125

Regions Bank Cons. Collections BH040402B PO Box 10063 Birmingham, AL 35202-0063

RJM Acquisitions LLC 575 Underhill Boulevard Suite 224 Syosset, NY 11791-3416

Robert E Kramer Esq 555 West Granada Boulevard Suite A9 Ormond Beach, FL 32174

United States Bankruptcy Court Middle District of Florida

In re	Dorothy Wright		Case No.				
		Debtor(s)	Chapter	13			
	DISCLOSURE OF COMPENSAT	TION OF ATTORNE	EY FOR DI	EBTOR(S)			
C	ursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I ompensation paid to me within one year before the filing of the erendered on behalf of the debtor(s) in contemplation of or in	e petition in bankruptcy, or a	greed to be paid	to me, for services rendered or to			
	For legal services, I have agreed to accept		\$	2,600.00			
	Prior to the filing of this statement I have received		\$	0.00			
	Balance Due		\$	2,600.00			
2. \$	281.00 of the filing fee has been paid.						
3. T	he source of the compensation paid to me was:						
	■ Debtor □ Other (specify):						
4. T	he source of compensation to be paid to me is:						
	■ Debtor □ Other (specify):						
5. I	I have not agreed to share the above-disclosed compensation	n with any other person unles	ss they are mem	abers and associates of my law firm.			
[I have agreed to share the above-disclosed compensation we copy of the agreement, together with a list of the names of the share the above-disclosed compensation with a list of the names of the share the above-disclosed compensation with the share the sh						
6. I	n return for the above-disclosed fee, I have agreed to render le	gal service for all aspects of t	the bankruptcy	case, including:			
b. c.	 a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] Negotiations with secured creditors to reduce to market value; exemption planning; 						
	In addition to the fees and filing fee above, Del counseling course fee & financial managemen		following ne	cessary expenses: credit			
7. B	y agreement with the debtor(s), the above-disclosed fee does r Representation of the debtors in any discharg matter to the extent that the matter proceeds to order; adversary proceedings; conversion to a matter post-discharge and/or post confirmation	eability actions; relief fro o an evidentiary hearing mother bankruptcy chap	om stay action or is listed or	n the Court's a la carte fee			
	CER	TIFICATION					
	certify that the foregoing is a complete statement of any agree nkruptcy proceeding.	ment or arrangement for payi	ment to me for	representation of the debtor(s) in			
Dated:	February 24, 2014	/s/ David W. Fineman, Esq.					
		David W. Fineman, Es	sq.				
		The Dellutri Law Grou 1436 Royal Palm Squ					
		Fort Myers, FL 33919-	·1049				
		(239) 939-0900 Fax: (239) 939-058	8			

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B 22C (Official Form 22C) (Chapter 13) (04/13)

In re	Dorothy Wright	According to the calculations required by this statement:
~	Debtor(s)	■ The applicable commitment period is 3 years.
Case Ni		☐ The applicable commitment period is 5 years.
	(If known)	☐ Disposable income is determined under § 1325(b)(3).
		■ Disposable income is not determined under § 1325(b)(3).
		(Check the boxes as directed in Lines 17 and 23 of this statement.)

CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

In addition to Schedules I and J, this statement must be completed by every individual chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

		Par	rt I.	REPORT OF I	NC	COI	ME				
1	a. =	Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed. a. ■ Unmarried. Complete only Column A ("Debtor's Income") for Lines 2-10. b. □ Married. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 2-10.									
	All fi calen the fi	All figures must reflect average monthly income received from all sources, derived during the six calendar months prior to filing the bankruptcy case, ending on the last day of the month before he filing. If the amount of monthly income varied during the six months, you must divide the six-month total by six, and enter the result on the appropriate line.						Column A Debtor's Income		Column B Spouse's Income	
2	Gros	s wages, salary, tips, bonuses, overtime, co	mm	issions.				\$	2,368.39	\$	
3							1				
	a.	Gross receipts	\$	Debtor 0.0	0	\$	Spouse	1			
	b.	Ordinary and necessary business expenses	\$	0.0		\$		11			
	c.	Business income	Su	btract Line b fro	n I	Lin	e a	\$	0.00	\$	
4	the ap	s and other real property income. Subtract oppropriate column(s) of Line 4. Do not enter of the operating expenses entered on Line I Gross receipts Ordinary and necessary operating expenses Rent and other real property income	a nu b as s \$	a deduction in l Debtor 0.0	ero. Par 00	** T	Oo not include any V. Spouse	\$	0.00	\$	
5	+	est, dividends, and royalties.						\$	0.00		
6	+	<u> </u>						+			
7	Pension and retirement income. Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by the debtor's spouse. Each regular payment should be reported in only one column; if a payment is listed in Column A, do not report that payment in Column B.					\$	300.00				
8	Howe benef or B,	Unemployment compensation. Enter the amount in the appropriate column(s) of Line 8. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below: Unemployment compensation claimed to]			
		benefit under the Social Security Act Debto	- U	0.00	no			\$	0.00	-	

	Income from all other sources. Specify source and amount. If necessary, list additional sources on a separate page. Total and enter on Line 9. Do not include alimony or separate maintenance payments paid by your spouse, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or		
9	payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism.		
	Debtor Spouse		
	a.	0.00	\$
10	Subtotal. Add Lines 2 thru 9 in Column A, and, if Column B is completed, add Lines 2 through 9	0.00	φ
10	in Column B. Enter the total(s).	68.39	\$
11	Total. If Column B has been completed, add Line 10, Column A to Line 10, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 10, Column A.		2,668.39
	Part II. CALCULATION OF § 1325(b)(4) COMMITMENT PERIOD		
12	Enter the amount from Line 11	\$	2,668.39
13	Marital Adjustment. If you are married, but are not filing jointly with your spouse, AND if you contend that calculation of the commitment period under § 1325(b)(4) does not require inclusion of the income of your spour enter on Line 13 the amount of the income listed in Line 10, Column B that was NOT paid on a regular basis for the household expenses of you or your dependents and specify, in the lines below, the basis for excluding this income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustment on a separate page. If the conditions for entering this adjustment do not apply, enter zero. a. \$ \$ b. \$ \$ c. \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	or the nts	
	Total and enter on Line 13	\$	0.00
14	Subtract Line 13 from Line 12 and enter the result.	\$	2,668.39
15	Annualized current monthly income for § 1325(b)(4). Multiply the amount from Line 14 by the number 12 enter the result.	and \$	32,020.68
16	Applicable median family income. Enter the median family income for applicable state and household size. (This information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)		
	a. Enter debtor's state of residence: FL b. Enter debtor's household size: 3	\$	53,952.00
17	 Application of § 1325(b)(4). Check the applicable box and proceed as directed. ■ The amount on Line 15 is less than the amount on Line 16. Check the box for "The applicable commitment the top of page 1 of this statement and continue with this statement. □ The amount on Line 15 is not less than the amount on Line 16. Check the box for "The applicable commattent the top of page 1 of this statement and continue with this statement. 		
	Part III. APPLICATION OF § 1325(b)(3) FOR DETERMINING DISPOSABLE INCOME	E	
18	Enter the amount from Line 11.	\$	2,668.39
19	Marital Adjustment. If you are married, but are not filing jointly with your spouse, enter on Line 19 the total of any income listed in Line 10, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income(such payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If the conditions for entering this adjustment do not apply, enter zero. a.	e	
	Total and enter on Line 19.	\$	0.00
20	Current monthly income for § 1325(b)(3). Subtract Line 19 from Line 18 and enter the result.	\$	2,668.39

Application of \$ 1325(b)(3). Check the applicable hox and proceed as directed. Application of \$ 1325(b)(3). Check the applicable hox and proceed as directed. The amount on Line 21 is more than the amount on Line 22. Check the box for "Disposable income is determined under \$ 1325(b)(3)" at the top of page 1 of this statement and complete the remaining parts of this statement. But it is statement and complete the remaining parts of this statement. But it is statement. But on complete Part VI of this statement. But on complete Parts IV, V, or VI. Part IV. CALCULATION OF DEDUCTIONS FROM INCOME Subpart A: Deductions under Standards of the Internal Revenue Service (IRS) Autional Standards: food, appared and services, housekeeping supplies, personal care, and miscellaneous. Enter in Line 24A the "Total" amount from IRS National Anthrack for Allowable Living Expenses for the applicable number of persons is the number of any additional dependents whom you support. National Standards: health care. Enter in Line at below the amount from IRS National Standards for Out-of-Pocket Health Care for persons whore of Syears of age of older. This influence is a state of the IRS National Standards for Out-of-Pocket Health Care for persons in each age category is the number in that category that would currently be allowed as exemptions on your feeleral income tax extern, plus the number in that category that would currently be allowed as exemptions on your feeleral income tax extern, plus the number of persons who no 65 years of age or older. The applicable number of persons who are objected to the persons in each age category is the number in that category that would currently be allowed as exemptions on your feeleral income tax extern, plus the number of persons under 65 years of age or older. The applicable family size consists of the number of persons in each age category is the	21	Annualized current monthly income for § 1325(b)(3). Multiply the amount from Line 20 by the number 12 and enter the result.					\$	32,020.68		
The amount on Line 21 is more than the amount on Line 22. Check the box for "Disposable income is determined under \$ 1325(b)(3)" at the top of page 1 of this statement and complete the remaining parts of this statement. In the 21 is not more than the amount on Line 22. Check the box for "Disposable income is not determined under 1325(b)(3)" at the top of page 1 of this statement and complete Part VII of this statement. Do not complete Parts IV, V, or VI. Part IV. CALCULATION OF DEDUCTIONS FROM INCOME Subpart A: Deductions under Standards of the Internal Revenue Service (IRS) National Standards: food, appared and services, housekeeping supplies, personal care, and miscellaneous. Enter in Line 244 the "Total" amount from IRS National Standards of Allowable Living Expenses for the applicable number of persons. (This information is available at www.usdig.gov/asts of from the clerk of the bankruptcy court.) The applicable number of persons is the number of that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.	22	Applicable median family income. Enter the amount from Line 16.						\$	53,952.00	
1325(b)(3)" at the top of page 1 of this statement and complete Part VII of this statement. Do not complete Parts IV, V, or VI.	23	☐ The amount on Line 21 is more than the amount on Line 22. Check the box for "Disposable income is determined by the companion of the compan						nined u	ınder §	
National Standards: food, apparel and services, housekeeping supplies, personal care, and miscellaneous. Enter in Lie 24A the "Total" amount from IRS National Standards for Allowable Living Expenses for the applicable number of persons. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court). The applicable number of persons is the number of any additional dependents whom you support. National Standards: health care. Enter in Line al below the amount from IRS National Standards for Out-of-Pocket Health Care for persons of Syears of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons of Syears of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons of Syears of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons of Syears of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons of Syears of age or older. (The applicable number of persons in each age category is the number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are under 65 years of age or older. (The applicable number of persons of age and old currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. (In the persons of your persons of your dependent of the result in Line 24B.) Persons under 65 years of age Persons 65 years of age or older Allowance per person B1. Number of persons B2. Number of persons B										
National Standards: food, apparel and services, housekeeping supplies, personal care, and miscellaneous. Eleter in Line 24A the "Total" amount from IRS National Standards for Allowable Living Expenses for the applicable number of persons. (This information is available at www.usdoi.gov/ust/ or from the clerk of the bankruptey court.) The applicable number of persons is the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons so the search of the papticable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are of Syears of age, and enter in Line b2 the applicable number of persons who are 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age or older. (The applicable number of persons in each age category is the number of any additional dependents whom you you support.) Multiply Line a1 by Line b1 to obtain a total amount for persons def 5, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 24B. Persons under 65 years of age Persons 65 years of age or older Allowance per person			Part IV. C	ALCULATION ()F I	DEDU	CTIONS FR	OM INCOME		
Enter in Line 24A the "Total" amount from IRS National Standards for Allowable Living Expenses for the bankruptcy court.) The applicable number of persons. (This information is available at www.usdoi.gov/ust/ or from the clerk of the bankruptcy court.) The applicable number of persons is the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. National Standards: health care. Enter in Line al below the amount from IRS National Standards for Out-of-Pocket Health Care for persons of years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons of years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b It he applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of persons who are 65 years of age or older. (The applicable number of persons who are 65 years of age or older. (The applicable number of persons who are 65 years of age or older. (The applicable number of persons who are 65 years of age or older. (The applicable number of persons who are 65 years of age or older at 1 Line cl. Multiply Line a1 by Line b2 to obtain a total amount for persons under 65 and enter the result in Line cl. Multiply Line a1 by Line b2 to obtain a total amount for persons 65 and older, and enter the result in Line cl. Multiply Line a1 by Line b2 to obtain a total amount for persons 65 and older, and enter the result in Line cl. Multiply Line a1 by Line b2 to obtain a total amount for persons 65 years of age or older. Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and Utilities Standards; mortgage/rent expense. Enter, in Line a below, the amount			Subpart A: D	eductions under Star	ndar	ds of th	e Internal Reve	enue Service (IRS)		
Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age or older. (The applicable number of persons in each age category is the number in that category that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.) Multiply Line a1 by Line b2 to obtain a total amount for persons under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for persons under 65, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line c24B. Persons under 65 years of age Persons 65 years of age or older a1. Allowance per person b2. Number of persons c1. Subtotal Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and Utilities Standards: non-mortgage expenses for the applicable county and family size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court). The applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your country and family size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court) (the applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional	24A	Enter in Line 24A the "Total" amount from IRS National Standards for Allowable Living Expenses for the applicable number of persons. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) The applicable number of persons is the number that would currently be allowed as exemptions					\$			
a1. Allowance per person a2. Allowance per person b1. Number of persons b2. Number of persons c1. Subtotal c2. Subtotal s Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and family size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court). The applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and family size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court) (the applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 47; subtract Line b from Line a and enter the result in Line 25B. Do not enter an amount less than zero. a. IRS Housing and Utilities Standards; mortgage/rent expense \$ b. Average Monthly Payment for any debts secured by your home, if any, as stated in Line 47 \$ c. Net mortgage/rental expense Subtract Line b from Line a. Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 25A and 25B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:	24B	Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age or older. (The applicable number of persons in each age category is the number in that category that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.) Multiply Line a1 by Line b1 to obtain a total amount for persons under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for persons 65 and older, and enter the result in Line				ional Standards for lable at cable number of persons o are 65 years of age or cory that would currently tional dependents whom and enter the result in and enter the result in Line				
b1. Number of persons b2. Number of persons c1. Subtotal c2. Subtotal s		Persons under 65 years of age			Pers	Persons 65 years of age or older				
Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and family size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court). The applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and family size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court) (the applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 47; subtract Line b from Line a and enter the result in Line 25B. Do not enter an amount less than zero. [a. IRS Housing and Utilities Standards; mortgage/rent expense">[a. IRS Housing and Utilities Standards; mortgage/rent expense [b. Average Monthly Payment for any debts secured by your home, if any, as stated in Line 47 [c. Net mortgage/rental expense		a1.	Allowance per person		a2.	Allow	Allowance per person			
Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and family size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court). The applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and family size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court) (the applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 47; subtract Line b from Line a and enter the result in Line 25B. Do not enter an amount less than zero. a. IRS Housing and Utilities Standards; mortgage/rent expense b. Average Monthly Payment for any debts secured by your home, if any, as stated in Line 47 c. Net mortgage/rental expense Subtract Line b from Line a. Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 25A and 25B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:		b1.	Number of persons		b2.	Numb	er of persons			
Utilities Standards; non-mortgage expenses for the applicable county and family size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court). The applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and family size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court) (the applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 47; subtract Line b from Line a and enter the result in Line 25B. Do not enter an amount less than zero. IRS Housing and Utilities Standards; mortgage/rent expense		c1.	Subtotal		c2.	Subtot	al		\$	
Housing and Utilities Standards; mortgage/rent expense for your county and family size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court) (the applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 47; subtract Line b from Line a and enter the result in Line 25B. Do not enter an amount less than zero. a. IRS Housing and Utilities Standards; mortgage/rent expense \$ b. Average Monthly Payment for any debts secured by your home, if any, as stated in Line 47 c. Net mortgage/rental expense Subtract Line b from Line a. Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 25A and 25B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:	25A	Utilities Standards; non-mortgage expenses for the applicable county and family size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court). The applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of					his information is e family size consists of	\$		
b. Average Monthly Payment for any debts secured by your home, if any, as stated in Line 47 c. Net mortgage/rental expense Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 25A and 25B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:	25B	Housing and Utilities Standards; mortgage/rent expense for your county and family size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court) (the applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 47; subtract Line b from Line a and enter the result in Line 25B. Do								
home, if any, as stated in Line 47 c. Net mortgage/rental expense Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 25A and 25B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:										
Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 25A and 25B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:		home, if any, as stated in Line 47								
25B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:							\$			
, and the state of	26	25B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your				\$				

	Local Standards: transportation; vehicle operation/public transportation		
	expense allowance in this category regardless of whether you pay the regardless of whether you use public transportation.		
27A	Check the number of vehicles for which you pay the operating expension included as a contribution to your household expenses in Line 7. \square 0		
	If you checked 0, enter on Line 27A the "Public Transportation" amo Transportation. If you checked 1 or 2 or more, enter on Line 27A the Standards: Transportation for the applicable number of vehicles in the	"Operating Costs" amount from IRS Local	
	Census Region. (These amounts are available at www.usdoj.gov/ust/		\$
27B	Local Standards: transportation; additional public transportation for a vehicle and also use public transportation, and you contend that your public transportation expenses, enter on Line 27B the "Public Tr Standards: Transportation. (This amount is available at www.usdoj.go.court.)	\$	
	Local Standards: transportation ownership/lease expense; Vehicle you claim an ownership/lease expense. (You may not claim an owner vehicles.) 1 2 or more.		<u>*</u>
28	Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy Average Monthly Payments for any debts secured by Vehicle 1, as stand enter the result in Line 28. Do not enter an amount less than zeta	court); enter in Line b the total of the ated in Line 47; subtract Line b from Line a	
	a. IRS Transportation Standards, Ownership Costs	\$	
	Average Monthly Payment for any debts secured by Vehicle b. 1, as stated in Line 47	\$	
	c. Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a.	\$
29	Local Standards: transportation ownership/lease expense; Vehicle the "2 or more" Box in Line 28. Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy Average Monthly Payments for any debts secured by Vehicle 2, as stand enter the result in Line 29. Do not enter an amount less than zero.		
	a. IRS Transportation Standards, Ownership Costs	\$	
	b. Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 47	\$	
	c. Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a.	\$
30	Other Necessary Expenses: taxes. Enter the total average monthly e state, and local taxes, other than real estate and sales taxes, such as in security taxes, and Medicare taxes. Do not include real estate or sale	come taxes, self employment taxes, social	\$
31	Other Necessary Expenses: involuntary deductions for employment deductions that are required for your employment, such as mandatory uniform costs. Do not include discretionary amounts, such as volu	\$	
32	Other Necessary Expenses: life insurance. Enter total average monlife insurance for yourself. Do not include premiums for insurance any other form of insurance.	\$	
33	Other Necessary Expenses: court-ordered payments. Enter the tot pay pursuant to the order of a court or administrative agency, such as include payments on past due obligations included in line 49.	\$	
34	Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.		
25		thly amount that you actually expend on	\$
35	Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare - such as baby-sitting, day care, nursery and preschool. Do not include other educational payments.		

36	Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 24B. Do not include payments for health insurance or health savings accounts listed in Line 39.	\$
37	Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service - such as pagers, call waiting, caller id, special long distance, or internet service-to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.	\$
38	Total Expenses Allowed under IRS Standards. Enter the total of Lines 24 through 37.	\$
	Subpart B: Additional Living Expense Deductions	
	Note: Do not include any expenses that you have listed in Lines 24-37	
	Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents.	
39	a. Health Insurance \$	
	b. Disability Insurance \$	
	c. Health Savings Account \$	
	Total and enter on Line 39	\$
	If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below: \$	
40	Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Do not include payments listed in Line 34.	\$
41	Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incur to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.	\$
42	Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary.	\$
43	Education expenses for dependent children under 18. Enter the total average monthly expenses that you actually incur, not to exceed \$156.25 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards.	\$
44	Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary.	\$
45	Charitable contributions. Enter the amount reasonably necessary for you to expend each month on charitable contributions in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2). Do not include any amount in excess of 15% of your gross monthly income.	\$
46	Total Additional Expense Deductions under § 707(b). Enter the total of Lines 39 through 45.	\$

		Subpart C: Deductions for I	Debt I	Payment		
47	Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of creditor, identify the property securing the debt, state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 47.					
	Name of Creditor	Property Securing the Debt		Average Monthly Payment	Does payment include taxes or insurance	
	a.		\$ To	otal: Add Lines	□yes □no	\$
48	motor vehicle, or other property ned your deduction 1/60th of any amoun payments listed in Line 47, in order sums in default that must be paid in	es. If any of debts listed in Line 47 are cessary for your support or the support of the "cure amount") that you must put to maintain possession of the property order to avoid repossession or foreclest additional entries on a separate page	t of you eay the y. The o sure. L	r dependents, y creditor in addi- cure amount wo	ou may include in tion to the ould include any	
	Name of Creditor	Property Securing the Debt		1/60th of t	the Cure Amount	
	a.				Total: Add Lines	\$
49	Payments on prepetition priority claims. Enter the total amount, divided by 60, of all priority claims, such as priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing. Do not include current obligations, such as those set out in Line 33. Chapter 13 administrative expenses. Multiply the amount in Line a by the amount in Line b, and enter the					
50	resulting administrative expense. a. Projected average monthly Chapter 13 plan payment. b. Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) c. Average monthly administrative expense of chapter 13 case Total: Multiply Lines a and b			nes a and b	\$	
51	Total Deductions for Debt Payme	nt. Enter the total of Lines 47 through	h 50.			\$
		Subpart D: Total Deductions	s fron	Income		
52	Total of all deductions from incor	ne. Enter the total of Lines 38, 46, an	d 51.			\$
	Part V. DETERM	INATION OF DISPOSABLE	E INC	OME UNDI	ER § 1325(b)(2))
53	Total current monthly income. Enter the amount from Line 20.			\$		
54	Support income. Enter the monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I, that you received in accordance with applicable nonbankruptcy law, to the extent reasonably necessary to be expended for such child.			\$		
55	Qualified retirement deductions. Enter the monthly total of (a) all amounts withheld by your employer from wages as contributions for qualified retirement plans, as specified in § 541(b)(7) and (b) all required repayments of loans from retirement plans, as specified in § 362(b)(19).			\$		
56	Total of all deductions allowed under § 707(b)(2). Enter the amount from Line 52.			\$		

57	Deduction for special circumstances. If there are special which there is no reasonable alternative, describe the special below. If necessary, list additional entries on a separate page You must provide your case trustee with documentation explanation of the special circumstances that make such				
57	Nature of special circumstances a. b. c.	Amount of Expense \$ \$ Total: Add Lines	\$		
58	Total adjustments to determine disposable income. Addresult.	\$			
59	Monthly Disposable Income Under § 1325(b)(2). Subtra	\$			
	Part VI. ADDITIO	NAL EXPENSE CLAIMS			
Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfar of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for each item. Total the expenses.					
60	Expense Description	Monthly Amount]		
	a. b.	\$	_		
	b. c.	\$ \$	-		
	d.	\$			
	Total: Add I	Lines a, b, c and d \$			
	Part VII.	. VERIFICATION			
61	I declare under penalty of perjury that the information proving must sign.) Date: February 24, 2014	Signature: // // // // // // // // // // // // //	int case, both debtors		

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 08/01/2013 to 01/31/2014.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: **Department of Veterans Affairs**

Income by Month:

6 Months Ago:	08/2013	\$1,732.80
5 Months Ago:	09/2013	\$1,732.80
4 Months Ago:	10/2013	\$1,775.88
3 Months Ago:	11/2013	\$2,760.72
2 Months Ago:	12/2013	\$1,840.50
Last Month:	01/2014	\$1,840.51
•	Average per	\$1,947.20
	month:	

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: overtime

Income by Month:

6 Months Ago:	08/2013	\$381.76
5 Months Ago:	09/2013	\$1,027.49
4 Months Ago:	10/2013	\$539.98
3 Months Ago:	11/2013	\$301.88
2 Months Ago:	12/2013	\$276.00
Last Month:	01/2014	\$0.00
•	Average per	\$421.19
	month:	

Line 7 - Contributions to household expenses of the debtor or dependents

Source of Income: Contributions from father

Income by Month:

6 Months Ago:	08/2013	\$300.00
5 Months Ago:	09/2013	\$300.00
4 Months Ago:	10/2013	\$300.00
3 Months Ago:	11/2013	\$300.00
2 Months Ago:	12/2013	\$300.00
Last Month:	01/2014	\$300.00
_	Average per month:	\$300.00